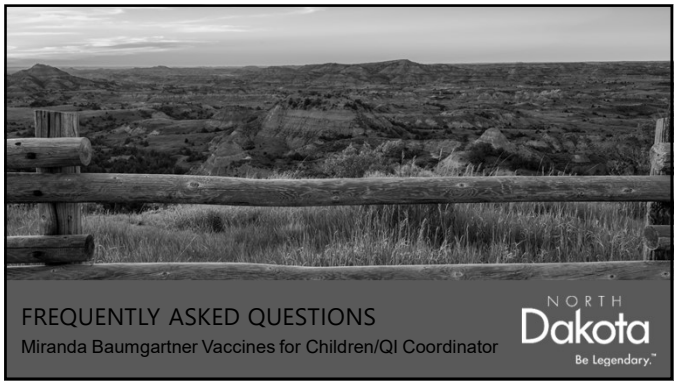


FREQUENTLY ASKED QUESTIONS

Miranda Baumgartner Vaccines for Children/QI Coordinator

NORTH Dakota Be Legendary.

1

TODAY'S PRESENTATION

- A question commonly asked of the Immunization Program will be presented.
- All participants will be given a short time to discuss and think about the question.
- Next the answer will be discussed.

2

DOES AN OPEN VIAL OF IPV NEED TO BE DISCARDED AFTER 30 DAYS?

3

OPEN MULTIDOSE VIALS

- Vaccines in multidose vials that do not require reconstitution can be used through the expiration date printed on the label as long as the vaccine is not contaminated unless indicated otherwise by the manufacturer.
  - IPV in a multidose vial can be used through the expiration date on the vial.
  - The Centers for Disease Control and Prevention (CDC) Immunization Program states that vaccines are to be discarded per the manufacturer's expiration date. The Joint Commission applies this approach to all vaccines - whether a part of the CDC or state immunization program or purchased by healthcare facilities - with the expectation that vaccines are managed in accordance with the product manufacturer's instructions for use (correct temperature, frequency of temperature checks, etc.) and any applicable regulatory requirements.

4

OPEN MULTIDOSE VIALS (CONT.)

- For some vaccines, the manufacturer specifies that once the multidose vial has been entered or the rubber stopper punctured, the vaccine must be used within a certain number of days. This information will be found in the vaccine package insert.
- This is commonly referred to as the "beyond-use date" (BUD). Specific information regarding the BUD can be found in the product information.

5

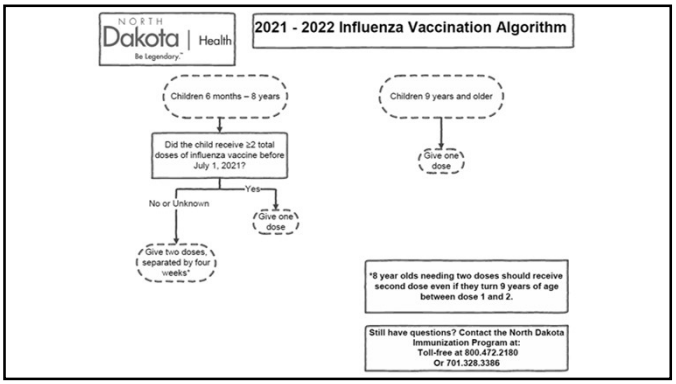
THE INFLUENZA VACCINE WE CARRY STATES A DOSE IS 0.5ML. DO CHILDREN 6 TO 35 MONTHS RECEIVE A HALF DOSE?

6

INFLUENZA VACCINE DOSAGES

- Influenza vaccine is recommended for all patients 6 months and older.
- All children 6 months through 8 years that have not received two doses of influenza vaccine prior to July 1, 2021 will need to receive two doses this influenza season.
- Influenza vaccine
  - *Afluria® is a **0.25 mL dose** for patients 6 to 35 months*
  - *Fluarix® is a **0.5mL dose** for all patients 6 months and older*
  - *FluLaval® is a **0.5mL dose** for all patients 6 months and older*
  - *Fluzone® is a **0.5mL dose** for 6 months and older*
  - *Flucelvax® is a **0.5mL dose** for **6 months and older****
  - *Flumist® is a **0.2mL dose** for 2 to 49 years*

7



8

THE CLINIC PLACED A VACCINE ORDER LAST WEEK FOR HPV, INFLUENZA AND VARICELLA VACCINES. TODAY YOU ONLY RECEIVED THE INFLUENZA VACCINE. WILL THE HPV AND VARICELLA VACCINE BE COMING?

9

VACCINE SHIPMENTS

- All vaccine orders can be reviewed in the order tab in NDIIS.
- Influenza, Varicella and MMRV vaccine, regardless if ordered with other vaccines, will be shipped separately.
- Allow 2 to 3 weeks for delivery of all other vaccines.

10

IS MENACTRA® BEING DISCONTINUED?

11

MENQUADFI®

- Protective against invasive meningococcal disease caused by *Neisseira meningiditis* types A, C, Y, and W-135.
- Approved for ages 2 years and older.
- Menactra® will be discontinued.
- The remaining Menactra® supply may be available until mid-2022.
  - Providers offering Menactra® should make a transition plan.
- Menveo® is still available through the VFC program.

12

HOW DO PROVIDER OFFICES REQUEST FOR DUPLICATE NDIIS RECORDS TO BE COMBINED?

13

CLIENT DE-DUPLICATION

What the NDIIS Does:

- Automated client deduplication looks at all client records touched the previous day and scans the NDIIS for potential duplicate records.
  - Any potential duplicates are placed in queue for daily manual review by the immunization program.
- Run a weekly report to look for duplicate client records flagged by NDIIS users and merge duplicates.

What You Can Do:

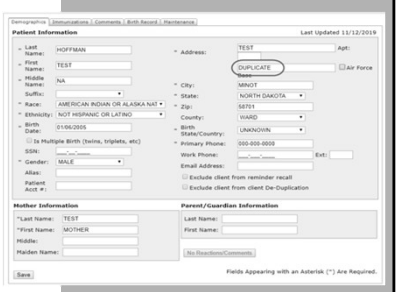
- Flag any duplicate records in the NDIIS by typing the word "DUPLICATE" on an empty field of the Demographics page.
  - DO NOT DELETE ANY DEMOGRAPHIC INFORMATION FROM THE NDIIS RECORD!
- Make sure patient names are spelled the same in the NDIIS and in your EHR whenever possible.
- Do not use nicknames in first name field.

14

14

FLAGGING DUPLICATE CLIENT RECORDS

- ❑The word "DUPLICATE" must be spelled correctly
- ❑Entering words such as "merge" or "wrong" will not flag duplicate records on the immunization program report and they won't be merged



15

VACCINE DE-DUPLICATION

What the NDIIS Does:

- Automated vaccine deduplication evaluates every dose as it is being entered in the NDIIS and automatically removes obvious duplicates.
  - Removes approximately 85% of duplicate doses automatically and immediately.
- Doses that cannot be easily identified as a duplicate are placed in a queue to be evaluated by immunization program staff.

What You Can Do:

- Delete duplicate historical doses and duplicate doses entered by your provider site.
- If doses left in a record after deleting a duplicate are invalid, contact the immunization program to have the doses set back to valid.
- If there are duplicate doses in a record you cannot delete, contact the immunization program to have the duplicates removed.

16

16

IN THE NDIIS VACCINE ORDERING MODULE HOW ARE THE DOSES ADMINISTERED CALCULATED?

17

NDIIS VACCINE ORDERING

- In NDIIS, the doses administered used to calculate the suggested order minimum (which is a one month supply) and the suggested order maximum (which is a three month supply) are based on the previous months doses administered.
- The ordering module does not take into account any doses that would have been given during the current calendar month.
- The inventory used to calculate the suggested order minimum and maximum is based on the provider office current inventory.

18

NDIIS VACCINE INVENTORY

- The NDIIS inventory on the ordering screen may not reflect what is currently on hand at provider offices unless the provider has reconciled their inventory.
- NDIIS vaccine order suggested min and max are created based on the inventory that the provider enters when placing a vaccine order.

19

WHEN DOCUMENTING VACCINE ADMINISTRATION, SHOULD THE LOT NUMBER FROM THE BOX OR THE VIAL BE USED?

20

VACCINE LOT NUMBERS

- The Unit of Sale (UoS) is the exterior packaging or carton that the vaccine is shipped in.

- The Unit of Use (UoU) is the vaccine vial or pre-filled syringe found within the UoS.

21

VACCINE LOT NUMBERS

- The UoS is generally the lot number used for inventory management and it is the lot number that the Division of Immunizations receives from the CDC shipping logs and enters into the NDIIS vaccine inventory.

22

VACCINE LOT NUMBERS

- The lot numbers available during dose data entry are only those lot numbers currently in the provider's NDIIS inventory, which are from the UoS.
- When the correct lot number is selected during dose entry, the dose will be decremented from the provider's inventory and will be tracked as either a public or private dose administered.

23

VACCINE LOT NUMBERS

- If the lot number entered into the EHR is from the UoU and not the UoS, a matching lot number cannot be found in the NDIIS and a dummy dose will be added to the client immunization record in place of the actual administered lot number.
- Without a matching lot number found in the NDIIS and added to the record, the dose cannot be decremented from the provider's inventory and will not be correctly tracked as either a public or private dose administered.
- A help guide can be found in the help menu in NDIIS.

24

VACCINE LOT NUMBERS

- If providers are scanning the vaccine vial the missing character can be added to the documentation in the EMR.

25

IF A PROVIDER OFFICE HAS INFLUENZA VACCINE ON HAND AND THEY ARE DONE VACCINATING CAN THEY SEND THE VACCINE BACK NOW?

26

INFLUENZA VACCINE

- Viable vaccine that has not expired cannot be sent back to McKesson until the vaccine expires.
- Vaccine should be kept on hand for those patients that may need a dose.
- The Division of Immunizations can be contacted in the case that you have extra vaccine on hand in the instance a provider is in need of vaccine.

27

THE CLINIC RECEIVED A NON-VIABLE SHIPMENT FROM MERCK. THE CLINIC WORKED WITH MERCK TO RETURN THE VACCINE AND GET A REPLACEMENT SHIPMENT BUT NOW WHAT STEPS DO I NEED TO TAKE?

28

VACCINE REPLACEMENT SHIPMENTS

- Information only applies to vaccine deemed nonviable upon delivery due to length of shipment, out of range temperatures upon delivery etc. This does not apply to expired or otherwise nonviable vaccines.
- With the exception of replacement shipments the Division of Immunizations receives all lot number information from Merck and McKesson as soon as vaccine is shipped from their warehouses.
  - We do not receive this information for replacement shipments so NDC code, lot number, expiration and quantity must be reported to the immunization program as soon as the vaccine arrives.
- The non-viable vaccine (original shipment) should then be entered into NDIIS as a WASTAGE.
  - A return in NDIIS will generate a packing slip and a pre-paid return label to send the vaccine back to McKesson.
  - A wastage will remove the vaccine from your inventory but not generate materials for the vaccine to be returned as Merck will provide the materials needed for a return.

29

ARE YOU ABLE TO ORDER MORE COVID19 VACCINE ANCILLARY SUPPLIES IF NEEDED?

30

COVID19 VACCINE ANCILLARY SUPPLIES

- COVID19 vaccine ancillary supplies have not changed in package quantity to accommodate booster/ 3rd doses.
- Extra COVID19 vaccine ancillary supplies need to be ordered through HAN assets http://hanassets.nd.gov/.

31

HOW DO I KNOW WHICH INFLUENZA PRESENTATION TO ENTER INTO NDIIS FOR MY VACCINE?

32

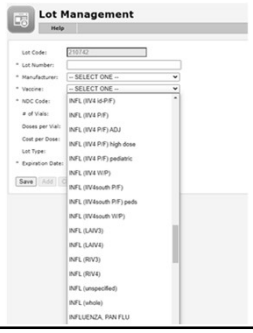
NDIIS LOT MANAGEMENT

- In the NDIIS help menu there is a flu abbreviation chart that will assist you with entering vaccine into the lot management section of NDIIS.

33

NDIIS LOT MANAGEMENT

- Choosing the correct presentation is important from the dropdown list.
- This is also important in data entry of historical doses into NDIIS.



34

HOW CAN I TELL APART ALL THE COVID19 VACCINE PRESENTATIONS IN NDIIS?

35

COVID19 VACCINE IN NDIIS

- Each COVID19 vaccine has their own NDIIS description.
  - COVID19 Pfizer- current purple cap
  - COVID19 Pfizer 12 plus- NEW grey cap
  - COVID19 5-11 years – Current orange cap
  - COVID19 Janssen – J&J vaccine
  - COVID19 Moderna- Current Moderna vaccine

36

OUR CLINIC HAS BEGUN STOCKING FLUAD® FOR PEOPLE 65 AND OLDER? IS THIS A HIGH DOSE INFLUENZA VACCINE?

37

INFLUENZA VACCINE

- Fluad® is an adjuvanted influenza vaccine for adults 65 years and older. This vaccine is **NOT** a high-dose influenza vaccine.
  - Fluad® contains an adjuvant (additive) that helps create a stronger immune response. This has shown to have a significantly higher immune response than those who receive a standard influenza dose.
- Fluzone® High-Dose is the only licensed high-dose inactivated influenza vaccine.
  - Contains four times the amount of antigen as a regular influenza vaccine to help produce a stronger immune response in adults 65 years and older.

38

CAN THE PEDIATRIC PFIZER BE STORED IN THE FREEZER?

39

PEDIATRIC PFIZER

- Vaccine can be stored:
  - Ultra-cold freezer at temperatures of -90 to -60°C (-112 to -76°F) for up to 6 months in the trays.
  - Refrigerator at 2° to 8°C (36° to 46°F) for up to 10 weeks in the Pfizer tray or another tray. **DO NOT REFREEZE VACCINE.**

40

PEDIATRIC PFIZER

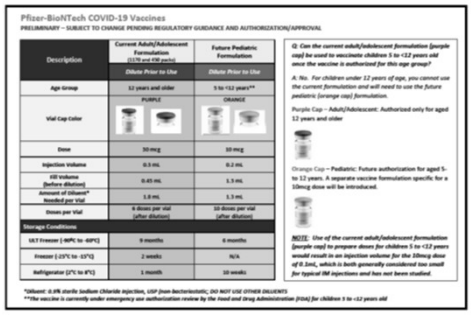
- Room temperature for no more than 12 hours prior to dilution, this is cumulative time for each vial. At that time vaccine will need to be placed in the refrigerator. After dilution vaccine can either be store in the refrigerator or at room temperature.

41

PEDIATRIC PFIZER

- Vaccine thawing prior to administration:
  - Thaw for up to 4 hours at 2° to 8°C (36° to 46°F) or 30 minutes at room temperature
  - Using either thawing method, vials must reach room temperature before dilution and must be diluted within 12 hours or placed in the refrigerator
- **Punctured vials need to be discarded after 12 hours**

42


Pfizer-BioNTech COVID-19 Vaccines

PRELIMINARY – SUBJECT TO CHANGE PENDING REGULATORY GUIDANCE AND AUTHORIZATION/APPROVAL

Description	Current Adult/Adolescent Formulation (12/9 and 4W purple)	Future Pediatric Formulation
	Dilute Prior to Use	Dilute Prior to Use
Age Group	12 years and older	5 to <12 years**
Vial Cap Color	PURPLE	ORANGE
Dose	30 mcg	10 mcg
Injection Volume	0.3 mL	0.2 mL
Fill Volume (before dilution)	0.45 mL	1.3 mL
Amount of Diluent* Needed per Vial	1.8 mL	1.3 mL
Doses per Vial	6 doses per vial (after dilution)	10 doses per vial (after dilution)
Storage Conditions		
ULT Freezer (-90°C to -60°C)	9 months	6 months
Freezer (-25°C to -15°C)	2 weeks	N/A
Refrigerator (2°C to 8°C)	1 month	10 weeks

*Diluent: 0.9% sterile Sodium Chloride Injection, USP (non-bacteriostatic; DO NOT USE OTHER DILUENTS

**The vaccine is currently under emergency use authorization review by the Food and Drug Administration (FDA) for children 5 to <12 years old

Q: Can the current adult/adolescent formulation (purple cap) be used to vaccinate children 5 to <12 years old once the vaccine is authorized for this age group?

A: No. For children under 12 years of age, you cannot use the current formulation and will need to use the future pediatric (orange cap) formulation.

Purple Cap – Adult/Adolescent: Authorized only for aged 12 years and older

Orange Cap – Pediatric: Future authorization for aged 5- to 12 years. A separate vaccine formulation specific for a 10mcg dose will be introduced.

NOTE: Use of the current adult/adolescent formulation (purple cap) to prepare doses for children 5 to <12 years would result in an injection volume for the 10mcg dose of 0.1mL, which is both generally considered too small for typical IM injections and has not been studied.

MAT3865

43

WHO SHOULD RECEIVE A COVID19 VACCINE BOOSTER DOSE?

44

COVID19 VACCINE BOOSTER DOSES

- COVID19 vaccine booster doses are indicated for all persons 18 year and older.
- Moderna and Pfizer booster should be 6 months after second dose.
- Janssen booster dose at least 2 months after your first dose.
- **Moderna booster are 0.25mL**

45

ARE COVID19 VACCINES INTERCHANGEABLE?

46

COVID19 VACCINES

- All doses of the primary series and the additional primary dose should be completed with the same vaccine product.
- If two doses of different mRNA COVID-19 vaccine products are administered in these situations (or administered inadvertently), the primary series is considered complete, and no subsequent doses of either product are recommended to complete the primary series.

47

CAN COVID19 VACCINE BE ADMINISTERED WITH OTHER VACCINES?

48

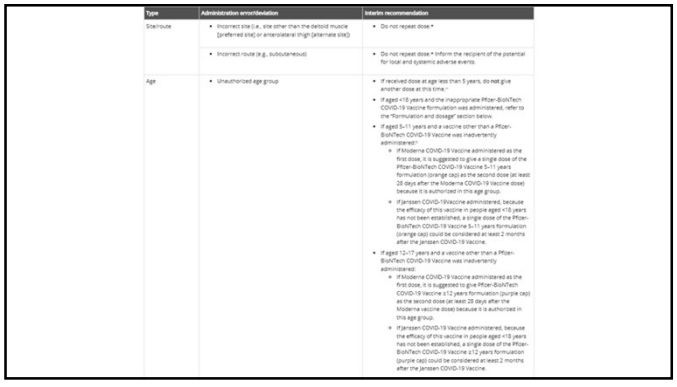
COADMINISTRATION OF VACCINES

- COVID19 vaccines may be administered without regard to timing of other vaccines. This includes simultaneous administration of COVID19 vaccine and other vaccines on the same day.
- If multiple vaccines are administered at a single visit, administer each injection in a different injection site.

49

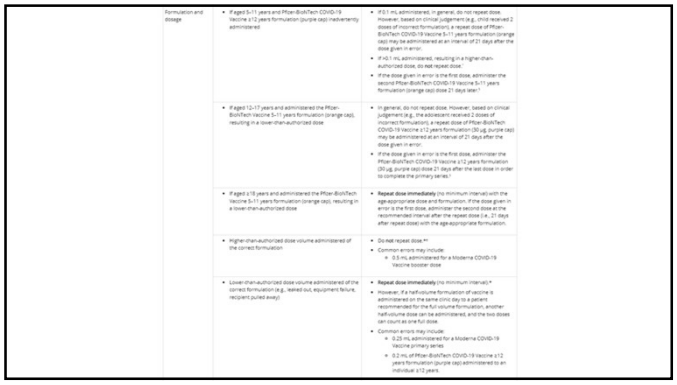
ARE THERE CASES WHEN YOU SHOULD REPEAT COVID19 VACCINE DOSE?

50



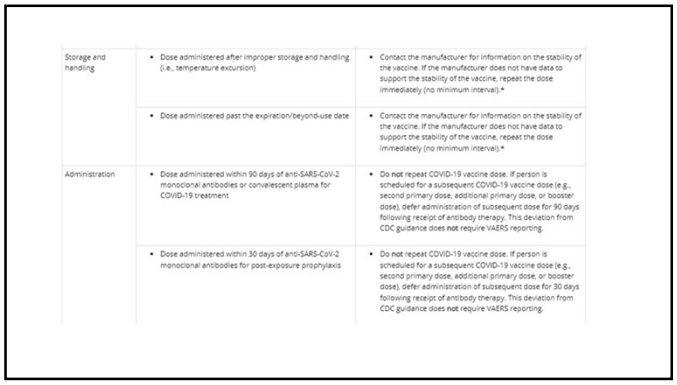
Type	Administration error/deviation	Interim recommendation
Site/route	• Incorrect site (i.e., site other than the deltoid muscle [preferred site] or anterolateral thigh [alternate site])	• Do not repeat dose.*
	• Incorrect route (e.g., subcutaneous)	• Do not repeat dose.* Inform the recipient of the potential for local and systemic adverse events.
Age	• Unauthorized age group	• If received dose at age less than 5 years, do not give another dose at this time.†
		• If aged <18 years and the inappropriate Pfizer-BioNTech COVID-19 Vaccine formulation was administered, refer to the "Formulation and dosage" section below.
		• If aged 5–11 years and a vaccine other than a Pfizer-BioNTech COVID-19 Vaccine was inadvertently administered: ◦ If Moderna COVID-19 Vaccine administered as the first dose, it is suggested to give a single dose of the Pfizer-BioNTech COVID-19 Vaccine 5–11 years formulation (orange cap) as the second dose (at least 28 days after the Moderna COVID-19 Vaccine dose) because it is authorized in this age group. ◦ If Janssen COVID-19 vaccine administered, because the efficacy of this vaccine in people aged <18 years has not been established, a single dose of the Pfizer-BioNTech COVID-19 Vaccine 5–11 years formulation (orange cap) could be considered at least 2 months after the Janssen COVID-19 Vaccine.
		• If aged 12–17 years and a vaccine other than a Pfizer-BioNTech COVID-19 Vaccine was inadvertently administered: ◦ If Moderna COVID-19 Vaccine administered as the first dose, it is suggested to give Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (purple cap) as the second dose (at least 28 days after the Moderna vaccine dose) because it is authorized in this age group. ◦ If Janssen COVID-19 Vaccine administered, because the efficacy of this vaccine in people aged <18 years has not been established, a single dose of the Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (purple cap) could be considered at least 2 months after the Janssen COVID-19 Vaccine.

51



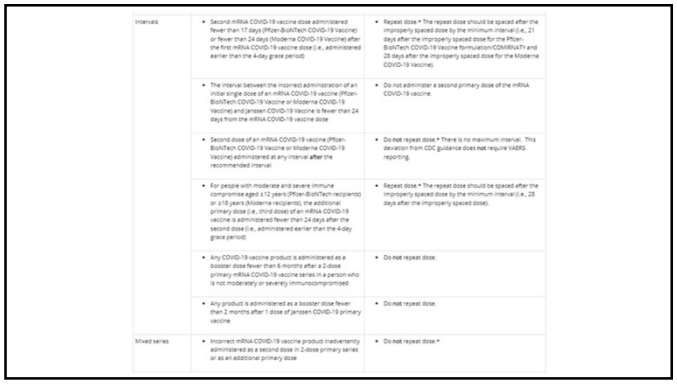
Formulation and dosage	• If aged 5–11 years and Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (purple cap) inadvertently administered	• If 0.1 mL administered, in general, do not repeat dose. However, based on clinical judgement (e.g., child received 2 doses of incorrect formulation), a repeat dose of Pfizer-BioNTech COVID-19 Vaccine 5–11 years formulation (orange cap) may be administered at an interval of 21 days after the dose given in error. • If 0.1 mL administered, resulting in a higher-than-authorized dose, do **not** repeat dose. • If the dose given in error is the first dose, administer the second Pfizer-BioNTech COVID-19 Vaccine 5–11 years formulation (orange cap) dose 21 days later.[1]
	• If aged 12–17 years and administered the Pfizer-BioNTech Vaccine 5–11 years formulation (orange cap), resulting in a lower-than-authorized dose	• In general, do not repeat dose. However, based on clinical judgement (e.g., the adolescent received 2 doses of incorrect formulation), a repeat dose of Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (30 µg, purple cap) may be administered at an interval of 21 days after the dose given in error. • If the dose given in error is the first dose, administer the Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (30 µg, purple cap) dose 21 days after the last dose in order to complete the primary series.[1]
	• If aged ≥18 years and administered the Pfizer-BioNTech Vaccine 5–11 years formulation (orange cap), resulting in a lower-than-authorized dose	• **Repeat dose immediately** (no minimum interval) with the age-appropriate dose and formulation. If the dose given in error is the first dose, administer the second dose at the recommended interval after the repeat dose (i.e., 21 days after repeat dose) with the age-appropriate formulation.
	• Higher-than-authorized dose volume administered of the correct formulation	• Do not repeat dose.[11] • Common errors may include: ▪ 0.5 mL administered for a Moderna COVID-19 Vaccine booster dose
	• Lower-than-authorized dose volume administered of the correct formulation (e.g., leaked out, equipment failure, recipient pulled away)	• **Repeat dose immediately** (no minimum interval).* • However, if a half-volume formulation of vaccine is administered on the same clinic day to a patient recommended for the full-volume formulation, another half-volume dose can be administered, and the two doses can count as one full dose. • Common errors may include: ▪ 0.25 mL administered for a Moderna COVID-19 Vaccine primary series ▪ 0.2 mL of Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (purple cap) administered to an individual ≥12 years.

52



Storage and handling	• Dose administered after improper storage and handling (i.e., temperature excursion)	• Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have data to support the stability of the vaccine, repeat the dose immediately (no minimum interval).*
	• Dose administered past the expiration/beyond-use date	• Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have data to support the stability of the vaccine, repeat the dose immediately (no minimum interval).*
Administration	• Dose administered within 90 days of anti-SARS-CoV-2 monoclonal antibodies or convalescent plasma for COVID-19 treatment	• Do **not** repeat COVID-19 vaccine dose. If person is scheduled for a subsequent COVID-19 vaccine dose (e.g., second primary dose, additional primary dose, or booster dose), defer administration of subsequent dose for 90 days following receipt of antibody therapy. This deviation from CDC guidance does **not** require VAERS reporting.
	• Dose administered within 30 days of anti-SARS-CoV-2 monoclonal antibodies for post-exposure prophylaxis	• Do **not** repeat COVID-19 vaccine dose. If person is scheduled for a subsequent COVID-19 vaccine dose (e.g., second primary dose, additional primary dose, or booster dose), defer administration of subsequent dose for 30 days following receipt of antibody therapy. This deviation from CDC guidance does **not** require VAERS reporting.

53



Intervals	• Second mRNA COVID-19 vaccine dose administered fewer than 17 days (Pfizer-BioNTech COVID-19 Vaccine) or fewer than 24 days (Moderna COVID-19 Vaccine) after the first mRNA COVID-19 vaccine dose (i.e., administered earlier than the 4-day grace period)	• Repeat dose.* The repeat dose should be spaced after the improperly spaced dose by the minimum interval (i.e., 21 days after the improperly spaced dose for the Pfizer-BioNTech COVID-19 Vaccine formulation/COMIRNATY and 28 days after the improperly spaced dose for the Moderna COVID-19 Vaccine).
	• The interval between the incorrect administration of an initial single dose of an mRNA COVID-19 vaccine (Pfizer-BioNTech COVID-19 Vaccine or Moderna COVID-19 Vaccine) and Janssen COVID-19 Vaccine is fewer than 24 days from the mRNA COVID-19 vaccine dose	• Do not administer a second primary dose of the mRNA COVID-19 vaccine.
	• Second dose of an mRNA COVID-19 vaccine (Pfizer-BioNTech COVID-19 Vaccine or Moderna COVID-19 Vaccine) administered at any interval **after** the recommended interval	• Do **not** repeat dose.* There is no maximum interval. This deviation from CDC guidance does **not** require VAERS reporting.
	• For people with moderate and severe immune compromise aged ≥12 years (Pfizer-BioNTech recipients) or ≥18 years (Moderna recipients), the additional primary dose (i.e., third dose) of an mRNA COVID-19 vaccine is administered fewer than 24 days after the second dose (i.e., administered earlier than the 4-day grace period)	• Repeat dose.* The repeat dose should be spaced after the improperly spaced dose by the minimum interval (i.e., 28 days after the improperly spaced dose).
	• Any COVID-19 vaccine product is administered as a booster dose fewer than 6 months after a 2-dose primary mRNA COVID-19 vaccine series in a person who is not moderately or severely immunocompromised	• Do **not** repeat dose.
	• Any product is administered as a booster dose fewer than 2 months after 1 dose of Janssen COVID-19 primary vaccine	• Do not repeat dose.
Mixed series	• Incorrect mRNA COVID-19 vaccine product inadvertently administered as a second dose in 2-dose primary series or as an additional primary dose	• Do **not** repeat dose.*

54

Diluent (Pfizer-BioNTech COVID-19 Vaccine formulations only)	• ONLY diluent administered (i.e., sterile 0.9% sodium chloride)	• Administer the authorized dose immediately (no minimum interval).*
	• No diluent, resulting in higher than authorized dose (i.e., 0.3 ml of undiluted vaccine administered)	• Do not repeat dose** Inform the recipient of the potential for local and systemic adverse events.
	• Incorrect diluent type (e.g., sterile water, bacteriostatic 0.9% NS)	• Contact the manufacturer for information on the stability of the vaccine. If the manufacturer does not have information to support the stability of the vaccine, repeat the dose immediately (no minimum interval).
	• Incorrect diluent volume	• If dilution results in a higher-than-authorized dose, do not repeat dose and inform the recipient of the potential for local and systemic adverse events.** ◦ Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (purple cap): Applies to doses administered with diluent volume less than 1.8 mL ◦ Pfizer-BioNTech COVID-19 Vaccine 5–11 years formulation (orange cap): Applies to doses administered with diluent volume less than 1.3 mL • If dilution results in a lower-than-authorized dose, repeat dose immediately (no minimum interval).* ◦ Pfizer-BioNTech COVID-19 Vaccine ≥12 years formulation (purple cap): Applies to doses administered with diluent volume greater than 1.8 mL ◦ Pfizer-BioNTech COVID-19 Vaccine 5–11 years formulation (orange cap): Applies to doses administered with diluent volume greater than 1.3 mL

55

HOLIDAY VACCINE SHIPPING

56

VFC HOLIDAY SHIPPING SCHEDULE

- For vaccine orders placed by Friday, December 10th shipping before January 2022 should take place.
- There will be very limited shipping after December 13th and vaccines ordered after that day may not arrive until January 2022.

57

COVID19 VACCINE SHIPPING SCHEDULE

- Due to the holiday there will be limited COVID19 vaccine direct shipments. No direct shipments will take place December 23rd through December 27th and December 30th through January 3rd.
- There will be direct shipments on December 28th and 29th.
- Vaccine shipments will still continue from the warehouse with the exception of December 24th and December 31st.
- Normal direct shipping will resume on January 4th.
- CDC has advised that orders submitted during the week of December 13th will ship prior to the holiday blackout.

58

59

60

NORTH DAKOTA IMMUNIZATION PROGRAM

North Dakota Immunization Program Staff

Molly Howell, MPH Program Manager	Phone: 701.328.4556 Email: mahowell@nd.gov	Mary Woinarowicz, MA NDIIS Manager	Phone: 701.328.2404 Email: mary.woinarowicz@nd.gov
Abbi Berg, MPH VFC/Quality Improvement Manager	Phone: 701.328.3324 Email: alberg@nd.gov	Rachel Goebel, MPH NDIIS Coordinator	Phone: 701.214.7322 Email: rgoebel@nd.gov
Miranda Baumgartner VFC/QI Coordinator (West)	Phone: 701.328.2035 Email: mlbaumgartner@nd.gov	Jennifer Galbraith COVID Vaccine Program Manager	Phone: 701.328.2335 Email: jgalbraith@nd.gov
Sherrie Meixner VFC/QI Coordinator (East)	Phone: 701.541.7226 Email: smeixner@nd.gov	NDIIS Data Quality Coordinator	Phone: 701.328.4169 Email: Vacant
Danielle Pinnick, MPH Immunization Surveillance Coordinator	Phone: 701-204-1604 Email: dpinnick@nd.gov	Michelle Eberhardt, RN COVID-19 Vaccine Coordinator	Phone: 701-595-1551 Email: mieberhardt@nd.gov
Ally Schweitzer COVID-19 Vaccine Coordinator	Phone: 701-955-5286 Email: aschweitzer@nd.gov	Andrew Bjugstad COVID-19 Vaccine Coordinator	Phone: 701-955-5140 Email: abjugstad@nd.gov

61

POST-TEST

- Post-test
  - Nurses interested in continuing education credit, visit https://ndhealth.co1.qualtrics.com/jfe/form/SV_d6z2aW6GnmgiVMy
  - Successfully complete the five-question post-test to receive your certificate
  - Credit for this session available until January 12, 2022
- This presentation will be posted to our website: www.ndhealth.gov/immunize

62